



PART B - FEE(S) TRANSMITTAL

B/S

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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021567 7590 09/23/2003

WELLS ST. JOHN P.S.
601 W. FIRST AVENUE, SUITE 1300
SPOKANE, WA 99201

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Natalie King	(Depositor's name)
	(Signature)
12-16-2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/042,751	11/21/2002	Neal Margulis	MA74-012	5804

TITLE OF INVENTION: COMPUTER SYSTEM CONTROLLER HAVING INTERNAL MEMORY AND EXTERNAL MEMORY CONTROL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$350 \$665.00	\$300	\$350 \$965.00	12/23/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHAUHAN, ULKA J	2676	345-535000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Wells St. John, P.S.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Memtrax LLC

Woodside, CA, U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge any deficiencies or credit any overpayment, to Deposit Account Number 23-0925 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)
James D. Shaurette, #39,833

(Date) 12/16/03

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12/23/2003 GWORDF2 00000199 10042751

01 FC:2501	665.00 OP
02 FC:1504	300.00 OP
03 FC:8001	9.00 OP

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